



PART B - FEE(S) TRANSMITTAL

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CANTOR COLBURN, LLP
55 GRIFFIN ROAD SOUTH
BLOOMFIELD, CT 06002

02/23/2006 TBESHAH2 00000043 502513 09214822

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Patricia DiGregorio	(Depositor's name)
<i>Patricia DiGregorio</i>	(Signature)
February 22, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/211,822	01/11/1999	SERGE MULLER	14XZ00014	8165

TITLE OF INVENTION: METHOD FOR LOCATING AN ELEMENT OF INTEREST CONTAINED IN A THREE-DIMENSIONAL OBJECT, IN PARTICULAR DURING A STEREOEPICTIC INVESTIGATION IN THE X-RAY EXAMINATION OF THE BREAST

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	02/28/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
BALI, VIKRAM	2623	382-154000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/17, Rev 05/02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list <input type="checkbox"/> the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. CANTOR COLBURN LLP 2. _____ 3. _____
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

GE Medical Systems SA

France

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> A check in the amount of the fee(s) is enclosed.
<input type="checkbox"/> Publication Fee (No small entity discount permitted)	<input type="checkbox"/> Payment by credit card, Form PTO-2038 is attached.
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a. Applicant claiming SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Sean F. Sullivan*

Date February 22, 2006

Typed or printed name Sean F. Sullivan

Registration No. 38,328

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